


2004 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # P02000078610 1. Entity Name DEMERE CONSTRUCTION, INC.	
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FILED
04 NOV 16 PM 1:02
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business 14745 CR 565A GROVELAND, FL 34736	Mailing Address 14745 CR 565A GROVELAND, FL 34736
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2. Principal Place of Business 7936 Coffee Creek Lane Suite, Apt. #, etc.	3. Mailing Address 7936 Coffee Creek Lane Suite, Apt. #, etc.
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11042004 REIN-P CR2E098 (6/04)

City & State Groveland, FL	City & State Groveland, FL	4. FEI Number 47-0878782	Applied For <input type="checkbox"/> Not Applicable
Zip 34736	Country USA	Zip 34736	Country USA

6. Name and Address of Current Registered Agent DEMEREE, KENNETH A 14745 CR 565A GROVELAND, FL 34736	7. Name and Address of New Registered Agent Name Kenneth A. Demeree Street Address (P.O. Box Number is Not Acceptable) 7936 Coffee Creek Lane City Groveland FL Zip Code 34736
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8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of, registered agent.

SIGNATURE: Ken Demeree
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$150.00 After January 1, 2005, Fee will be \$300.00	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP DEMEREE, KENNETH A 14745 CR 565A GROVELAND, FL 34736	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 7936 Coffee Creek Lane Groveland, FL 34736
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV DEMEREE, STEVE 14745 CR 565A GROVELAND, FL 34736	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 7936 Coffee Creek Lane 14746 CR 565A Groveland, FL 34736
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition 000042787010 11/16/04--01061--017 **150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition JB 11/15

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Ken Demeree
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #